

# California MEDICINE

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(Delegates and Alternates to the A. M. A. are elected for terms of two calendar years.  
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## New Nonproprietary Drug Names Appearing in J.A.M.A.

A listing of new nonproprietary drug names began appearing in the November 18 *Journal of the American Medical Association*.

The AMA through its Council on Drugs, and the United States Pharmacopeia have recently joined forces in a program of selection of nonproprietary names for single entity drugs, i.e., those drugs with a single active ingredient or extracts from a single source.

"The purpose of publishing such a list at this time is twofold: (1) to promptly provide medical educators and physicians with basic and authoritative information on new drugs, and (2) to provide editors of medical journals with a convenient source of formally adopted, nonproprietary names and to encourage their use in these publications," a *Journal* editorial said.

## Screening Program Prevents Case of Mental Deficiency

A case of mental deficiency was prevented by an infant testing program in Cincinnati, it was reported in the November 25 *Journal of the American Medical Association*.

After testing more than 10,500 babies since 1958 for the condition known as phenylketonuria, which results in mental deficiency, a case was detected in a five-week-old baby and treatment begun at once, Helen K. Berry, M.A.; Betty S. Sutherland, M.D., and George M. Guest, M.D., University of Cincinnati College of Medicine, Cincinnati, said.

At nine months, the child appeared to be "developing normally, both mentally and physically," the authors said.

Under the Cincinnati program, hospitals distribute to new mothers kits to use in obtaining a urine specimen from the baby between four and six weeks after birth. The specimen on special filter paper is mailed into the hospital where analysis can reveal the existence of the disorder.

Hospitals in Cincinnati with large maternity services have joined the program, the authors said, and it is estimated that half the babies born in these hospitals are being tested.

Recently, Kentucky and Wisconsin began infant testing programs on a statewide basis, they said.

"As a result of these screening programs, infants with phenylketonuria have been found who would otherwise not have come to the attention of a physician until mental deficiency became apparent," the authors said.

The disorder is caused by an abnormality of the metabolism of phenylalanine, an amino acid essential to normal development. Treatment with a protein, hydrolysate, can prevent this abnormality from affecting mental development but cannot reverse the mental effects once they have occurred.

# BOOKS RECEIVED

*Books received by CALIFORNIA MEDICINE are acknowledged in this column. Selections will be made for more extensive review in the interest of readers as space permits.*

**THE ART OF THINKING**—Dagobert D. Runes—Philosophical Library, Inc., 15 East 40th St., New York 16, N. Y., 1961. 90 pages, \$2.75.

**CEREBRAL VASCULAR DISEASES**—Transactions of the Third Conference Held Under the Auspices of THE AMERICAN NEUROLOGICAL ASSOCIATION and THE AMERICAN HEART ASSOCIATION, Princeton, New Jersey; January 4-6, 1961. Conference Supported by a Grant from NATIONAL INSTITUTE OF NEUROLOGICAL DISEASES AND BLINDNESS. Clark H. Millikan, Chairman; Robert G. Siekert and Jack P. Whisnant, Editors. Published for The American Neurological Association and The American Heart Association by Grune & Stratton, Inc., 381 Park Avenue South, New York 16, N. Y., 1961. 247 pages, \$5.75.

**CIBA FOUNDATION STUDY GROUP NO. 10**—Biological Activity of the Leucocyte—in honour of Professor A. Vannotti. G. E. W. Wolstenholme, O.B.E., M.A., M.B., M.R.C.P., and Maeve O'Connor, B.A., Editors for the Ciba Foundation. Little, Brown and Company, Boston, Massachusetts, 1961. 120 pages, \$2.50.

**THE COMPLETE PEDIATRICIAN**—Eighth Revised Edition—Practical, Diagnostic, Therapeutic and Preventive Pediatrics—For the Use of General Practitioners, Pediatricians, Interns, and Medical Students—Wilbur C. Davison, M.A., D.Sc., M.D., James B. Duke Professor of Pediatrics, Duke University School of Medicine, and Pediatrician, Duke University Medical Center; and Jeana Davison Levinthal, B.A., M.D., Research Associate, Harvard Medical School. Printed by Seaman Printery for Duke University Press, Durham, N. C., 1961. 260 pages, plus index, \$4.50 by check with order, or for \$4.75 on credit.

## NEW BOOK

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1907 pages. (1961) Merck. \$7.50.

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**THE DOCTOR BUSINESS**—Revised Edition—Richard Carter. Doubleday & Company, Inc., 575 Madison Avenue, New York 22, New York, 1961. Dolphin Books, Paperback, 276 pages, 95 cents.

**ELECTROCARDIOGRAPHY — THIRD EDITION** — E. Grey Dimond, M.D., Director, Institute for Cardiopulmonary Diseases, Scripps Clinic and Research Foundation, La Jolla, California; Paul Schlesinger, M.D., Chief, Out-patient Department of Cardiology, Fifth Medical Clinic, University of Brasil, Rio de Janeiro, Brasil; and Rafael L. Luna, M.D., Cardiologist, Hospital Do Servidor Da Guanabara, Rio de Janeiro, Brasil. Distributor, The Corinth Press, Box 51, Mission, Kansas, 1961. 196 pages, \$6.00 per copy.

**ESSAYS ON THE FIRST HUNDRED YEARS OF ANAESTHESIA—VOLUME II**—W. Stanley Sykes, M.B.E., M.B., B.Chir. (Cantab.), D.A., Late Anaesthetist to the General Infirmary at Leeds, to the Hospital for Women and St. James' Hospital, Leeds, to the Leeds Dental Hospital, to the Halifax Royal Infirmary and to the Dewsbury General Hospital. The Williams & Wilkins Co., Baltimore 2, Maryland, exclusive U. S. agents, 1961. 187 pages, \$7.00.

**EYE SYMPTOMS IN BRAIN TUMORS**—Alfred Huber, M.D., Privat Dozent for Ophthalmology at the University of Zurich, Zurich, Switzerland. With a foreword by Prof. H. Krayenbuhl, Director of the Neurosurgical Clinic, University of Zurich, Zurich, Switzerland. Translated by Stefan Van Wien, M.D., Associate, Department of Ophthalmology, Northwestern University Medical School, Chicago, Illinois. With a foreword to the English translation by Derrick Vail, B.A., M.D., D.Oph. (Oxon.), F.A.C.S., F.R.C.S. (Hon.), Professor and Director, Department of Ophthalmology, Northwestern University Medical School, Chicago, Illinois. The C. V. Mosby Company, St. Louis, Mo., 1961. 329 pages, \$16.00.

**HEALTH IN INDUSTRY—A Guide for Engineers, Executives, and Doctors**—by R. C. Browne, M.A., D.M. (Oxon.), M.R.C.P. (London), Nuffield Professor of Industrial Health, King's College, Newcastle upon Tyne (University of Durham); Physician, Royal Victoria Infirmary, Newcastle upon Tyne, and Dryburn Hospital, Durham; Director, North of England Industrial Health Advisory Service. The Williams & Wilkins Co., Baltimore 2, Maryland, exclusive U. S. agents, 1961. 157 pages, \$4.50.

**HEMODYNAMICS OF AORTIC AND MITRAL VALVE DISEASE—Transbronchial Studies**—Alvin J. Gordon, M.D., Associate Attending Physician and Head of Cardiac Catheterization Team, The Mount Sinai Hospital, New York; Consultant for Cardiac Clinical Investigation, Beth El Hospital, Brooklyn, New York; Paul A. Kirschner, M.D., Assistant Attending Surgeon, The Mount Sinai Hospital, New York; Associate in Surgery, Columbia University; Associate Visiting Surgeon, Chest Service, Bellevue Hospital, New York; Attending Thoracic Surgeon, Veterans Administration Hospital, Bronx, New York; and Howard L. Moscovitz, M.D., Assistant Attending Physician, The Mount Sinai Hospital, New York. Grune & Stratton, Inc., 381 Park Avenue South, New York 16, N. Y., 1961. 136 pages, \$5.75.

**THE NATURE OF ESSENTIAL HYPERTENSION**—Sir George Pickering, M.D., F.R.C.P., F.R.S., Regius Professor of Medicine and Student of Christ Church, Oxford University. Grune & Stratton, Inc., 381 Park Avenue South, New York 16, N. Y., 1961. 151 pages, with 58 illustrations, \$4.00.

**PROGRESS IN LIVER DISEASES—Volume I**—edited by Hans Popper, M.D., Ph.D., Pathologist-in-Chief, The Mount Sinai Hospital; Professor of Pathology, College of Physicians and Surgeons, Columbia University, New York; and Fenton Schaffner, M.D., M.S., Assistant Attending Physician in Medicine and Pathology, The Mount Sinai Hospital; Associate in Medicine, College of Physicians and Surgeons, Columbia University, New York. Grune & Stratton, 381 Park Avenue South, New York 16, N. Y., 1961. 363 pages, \$13.75.

**STAPES SURGERY FOR OTOSCLEROSIS**—Victor Goodhill, M.D., Clinical Professor of Surgery (Otolaryngology), School of Medicine, University of California, Los Angeles; Chairman, Department of Otolaryngology, Cedars of Lebanon Hospital, Los Angeles. Paul B. Hoeber, Inc., Medical Division of Harper & Brothers, 49 East 33rd Street, New York 16, N. Y., 1961. 212 pages, \$11.50.

**THERAPEUTIC COMMUNICATION**—Jurgen Ruesch, M.D., W. W. Norton & Company, Inc., New York, N. Y., 1961. 480 pages, \$6.50.

## Identical Twins Suffer Identical Ills

A pair of 79-year-old identical twin women have suffered six identical ailments, according to a report in the November 4 *Journal of the American Medical Association*.

Drs. Lewis M. Schiffer, Matthew Zucker, and Eugene L. Lozner, Syracuse, N. Y., said the two women had a "unique combination of illnesses."

They both now suffer anemia, partial paralysis of the face, an abnormality of the small bowel and hernia of the colon, the authors said. In addition, they said, both women also had a benign tumor of the breast and probable toxemia of pregnancy.

Although anemia in identical twins is not unique, the physicians said, they could find no previous record of the incidence of the other disorders in twins.

The phenomenon suggests the possibility of a defect in one or more of the patients' chromosomes, the units of heredity, although no chromosome abnormality was observable, they said.

## Mortality of Executives Lower Than Average

The mortality rate among executives was found to be lower than that among the general male population in a 10-year study reported recently.

The study, reported in a publication of the American Medical Association, did not support the general impression that the business executive is "a harried and hurried man driven inexorably toward an early death."

Robert M. Thorner, M.P.H., and E. L. Crumacker, M.D., Washington, D. C., studied 451 white male executives of one of the major industrial corporations in the country who underwent annual medical examinations under the health maintenance program of the firm.

If the executives had experienced the mortality expected among the general white male population in the United States of comparable age, 25 deaths would have occurred, the researchers said in the November *Archives of Environmental Health*.

"Actually 11 executives died during the period of observation, yielding a standardized mortality ratio of 44 per cent, a considerably more favorable experience for the executive than that of white males of similar ages," they said.

Coronary heart disease predominates as a cause of death among the executives, the authors said, but the occurrence is "probably not excessive."

The favorable mortality of these executives is probably related to a high standard of living and good medical care, they said, adding:

"In the competition for executive positions, a healthy person undoubtedly possesses a competitive advantage. There is, therefore, this element of pre-selection in this population group. One would also like to believe that the periodic health examinations

(Continued on Page 38)

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## Mortality of Executives Lower Than Average

(Continued from Page 33)

received by this group made a positive contribution to their longevity. Undoubtedly, these periodic appraisals along with the generally better medical care received by the group are factors. Also of importance are the favorable environmental conditions enjoyed by this group, including better than average food, housing, and recreational opportunities."

On the other hand, they said, the stress encountered by this group is often cited as a tendency to reduce their longevity.

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"One may counter this argument by saying that stress, like beauty, is in the mind of the beholder," they said. "The wage earner who worries about a layoff may feel as much or more stress than the executive who fears loss of a \$50,000 a year job."

## Emotions Can Affect Accident Tendency

A person's emotional state may influence his susceptibility to accidents, according to Dr. Stanford G. Rogg, Wilmington, Del.

Dr. Rogg reported on a study which delved into the thought processes of 35 persons before they were involved in industrial accidents in the November *Archives of Environmental Health*, published by the American Medical Association.

Interviews with the accident victims revealed that an accident "may be an unconscious physical solution of an emotional problem," he said.

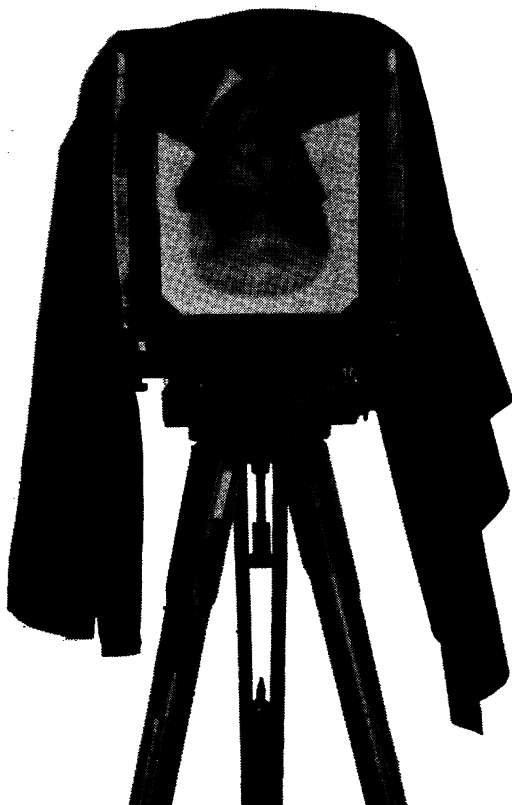
"We have all heard the statement that certain individuals tend to take their work home with them," he commented. "The reverse is often true. Some people tend to take homes to work with them."

Several cases in which emotion played a role in an accident were cited by Dr. Rogg.

In one instance a man twisted his ankle getting out of a truck as he suddenly shifted direction to

(Continued on Page 54)

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Number 1

## Insects as Allergen Injectants

### Severe Reactions to Bites and Stings of Arthropods

FRANK PERLMAN, M.D., Portland, Oregon

MANY ARTHROPODS are known to attack man for food or in defense or to carry on the life cycle. To a few persons the bites, stings or actual invasion of the skin by arthropods will cause excessive reactions which may take the form of large lasting local effect or systemic symptoms. Arthropods capable of producing such effects include chiefly those within the class *Hexapoda*. There are a few additional offenders in the class *Arachnida*<sup>1</sup> (Table 1).

Local reactions may vary from immediate urticaria to delayed lesions of tuberculin type to necrosis of granulomatous or even of Arthus type.<sup>5</sup> Systemic symptoms may be mild and transient or severe and even fatal.<sup>25</sup> These violent systemic reactions resemble more the anaphylactic shock of laboratory animals than the common allergic disorders of man (Table 2).

The development of severe reactions to bites and stings has been found by us to be statistically no more frequent in patients with general allergic disorders than in the general population, nor is there any apparent hereditary component. The acquired nature of allergic reactions of this type is frequently demonstrated in entomologists bitten accidentally or intentionally to supply blood meals. This has been demonstrated with mosquitoes, biting flies, fleas, lice, kissing bugs and scorpions. Naturally induced anaphylactic state and acquired immunity are illustrated in the following two case histories:

Presented before the Section on Allergy at the 90th Annual Session of the California Medical Association, Los Angeles, April 30 to May 3, 1961.

• Arthropods capable of penetrating human skin often cause severe local and systemic reactions. Local reactions suggest delayed hypersensitivity while systemic symptoms resemble more the anaphylactic shock in animals.

The nature of the antigen remains obscure but predominant evidence suggests its presence throughout the entire organism.

Positive history of hypersensitivity to insect injectants was obtained in approximately 20 per cent of persons in the course of routine interviews of 1,078 patients.

Repeated bites and stings at long or irregular intervals often induce a state of hypersensitivity, while repeated regular injections of extracts of these insects at shorter intervals may greatly reduce the hypersensitivity.

The clinical evidence of allergic sensitivity to insect bites and stings cannot be readily confirmed by skin testing or by other immunological procedures. The history and the character of the lesions as well as certain entomological knowledge of the habits of the insects offer a better basis for specific diagnosis.

Treatment with extracts of the whole offending insect generally provides good results but the protection afforded by such treatment varies in degree and duration.

CASE 1. A 5-year-old child was stung on the foot in early June 1960, the sting resulting in no local or systemic symptoms. A second sting, in early July of the same year on the scalp, produced large local swelling which persisted for several days. The third sting, in early August 1961 on the finger, was followed within five minutes by swelling about the lips

## EDITORIAL

### Time for Political Action

Physicians attending the recent Denver meeting of the American Medical Association met a new name—AMPAC, which is short for American Medical Political Action Committee, an organization whose purposes are expressed in its name.

The Denver audience, especially in the A.M.A. House of Delegates, was given a briefing on the new organization, its aims, its objectives and its needs. Many physicians handed in their personal checks to support this new group. Many others signed pledge cards to obligate themselves to make financial contributions this year or in the next few years.

To understand the whys and wherefores of AMPAC, a study of federal law is necessary. Why should physicians be asked to put their own funds into a new organization when they are already paying dues to medical organizations? Why can't the existing organizations do the job that is now cut out for a new group?

Answers to these and similar questions can best be made by stating that federal laws prohibit many political activities by existing medical organizations. Therefore, to get a job of politics done, a new organization which can operate within the framework of federal laws must be formed and put into operation.

Asked if federal laws could not be changed to allow our present medical organizations to operate in the field of politics, attorneys must give a flat negative answer. The laws now on the books were put there to prohibit grasping organizations, whether they be connected with management or with labor, from contributing campaign funds to candidates for federal office and thus, in effect, "buying" candidates who would then represent an individual interest rather than the voters of a district.

This portion of our laws applies to corporations and to labor unions. Obviously, Congress will not entertain a move to change them.

The federal law is specific. It states that "... it is unlawful for any corporation *whatever*, or any labor organization, to make a contribution or expenditure in connection with any election at which Presidential and Vice-Presidential electors or a Senator or Representative in, or a Delegate or Residential Commissioner to Congress are to be voted for, or in connection with any primary election or political convention or caucus held to select candidates for any of the foregoing offices . . ."

The same law, however, recognizes the rights of free speech and freedom to petition the government. It provides, also specifically, for noncorporate political committees which have the right to engage in activities denied to corporations. A political committee has been described by attorneys as follows: "A political committee is the lawful and accepted vehicle for application of influence to federal elections and is recognized as such by Congress."

Thus the Congress has preserved for the people the right of free speech and the right to petition the government, while at the same time it has determined how these rights may or may not be exercised.

As applied to medical organizations, these provisions mean that medical associations as now organized cannot enter into federal political campaigns in behalf of candidates for office. The members of such organizations, however, retain their individual right to join a noncorporate political action committee which is not so proscribed.

The full meaning of this situation was grasped by labor unions several years ago, when a nationwide political action committee was set up. Labor's political activities have been directed through this group since its inception.

Medicine now comes up to the point where direct political action in behalf of candidates who may influence our national lawmaking can determine whether physicians can continue the practice of medicine as free individuals or will in the end become virtually government employees.

# California MEDICAL ASSOCIATION

## NOTICES & REPORTS

### A.M.A. Denver Meeting

*This summary covers only a few of the many important subjects dealt with by the A.M.A. House of Delegates at its Denver meeting and is not intended as a detailed report on all actions taken.*

SOCIAL SECURITY health care, relations with the American College of Surgeons, organization of the American Medical Political Action Committee, medical discipline and poliomyelitis vaccine were among the major subjects acted upon by the House of Delegates at the American Medical Association's Fifteenth Clinical Meeting held November 26 to 30 in Denver.

Sounding the keynote for the Association's campaign to oppose enactment of the King-Anderson type of legislation in 1962, Dr. Leonard W. Larson of Bismarck, N. D., A.M.A. president, told the opening session of the House that proposals to incorporate health care benefits into the Social Security system "would certainly represent the first major, irreversible step toward the complete socialization of medical care."

The compelling issue, Dr. Larson declared, is socialization versus voluntarism—or compulsion versus freedom of choice. He predicted that courage, determination and the will to win on the part of physicians will bring the defeat of the King-Anderson bill in Congress next year.

Pointing out that "we are engaged in an historic struggle to preserve our country's unique system of medical care and our stature as a profession," Dr. Larson said:

"We are *for* voluntarism. We do not believe that Americans, acting either as citizens or as patients, require central direction from government in their choice of doctor or hospital, in the spending of their health care dollars, or in their selection of the health services and facilities best suited to their own individual needs.

"We take our stand for voluntary cooperation, for preservation of the historic federal-state organizational structure, for individual responsibility, for help for those persons who *need* help."

Dr. Larson emphasized that the A.M.A. will continue to give primary attention to implementing the Kerr-Mills Act in the states, promoting voluntary health insurance and prepayment plans designed for the aged, and upgrading nursing homes.

The House of Delegates gave enthusiastic approval to Dr. Larson's address and took several actions reaffirming strong support for the Kerr-Mills program to aid the needy and near-needy aged, and urging a concerted, determined fight against Social Security health care proposals in Congress.

The House advised all state and county medical societies to recognize the impending threat and to prepare now for any eventuality by continuing to oppose any scheme which tries to impose a substandard system of medical care on the American people.

"United, as well as individual effort, is essential," the House declared. "To stop short of our total effort is to invite disaster and to let loose upon our beloved America irreversible forces which will ultimately destroy her. We cannot and we must not fail."

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WARREN L. BOSTICK, M.D. . . . . President  
OMER W. WHEELER, M.D. . . . . President-Elect  
JAMES C. DOYLE, M.D. . . . . Speaker  
IVAN C. HERON, M.D. . . . . Vice-Speaker  
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# Ninety-first Annual CALIFORNIA MEDICAL ASSOCIATION

— **APRIL 15-18, 1962** —

## SIX OUTSTANDING GUEST SPEAKERS

### *Surgery*

MICHAEL E. DEBAKEY, M.D., Professor and Chairman of Department of Surgery, Baylor University College of Medicine, Houston.

### *Anesthesiology*

ARTHUR S. KEATS, M.D., Professor of Anesthesiology, Baylor University College of Medicine, Houston.

### *Pathology*

MALCOLM B. DOCKERTY, M.D., Surgical Pathologist, Mayo Clinic, Rochester.

### *Internal Medicine*

E. GREY DIMOND, M.D., Director, Institute for Cardiopulmonary Diseases, Scripps Clinic and Research Foundation, La Jolla.

### *Cardiovascular Research*

LOUIS N. KATZ, M.D., Director of Cardiovascular Research, Michael Reese Hospital and Medical Center, Chicago.

### *Pediatrics*

ALEXANDER S. NADAS, M.D., Associate Clinical Professor of Pediatrics, Harvard Medical School, and Cardiologist, Children's Hospital Medical Center, Boston.

---

### Management of Occlusive Arterial Disease

What's New in Hypertension?

• Thromboembolism

C.M.A. SPOTLIGHT ON MEDICINE 1962

*Clinical Use of the New Penicillins*

Pediatric Cardiology

• Ovarian Tumors

TRAINING PHYSICIANS FOR CALIFORNIA'S MEDICAL NEEDS

*Who Will Be the "Family Doctors" in 1970?*

# Scientific Meeting...

## SPECIAL FEATURE: *Basic Science Session*

### *Chemistry*

WENDELL H. GRIFFITH, PH.D., Professor and Chairman, Department of Physiological Chemistry, UCLA School of Medicine.

### *Anatomy*

HORACE W. MAGOUN, PH.D., Professor of Anatomy, Member of Brain Research Institute, UCLA School of Medicine.

### *Biology*

C. M. POMERAT, PH.D., Director, Division of Cellular Biology, Pasadena Foundation for Medical Research, and Clinical Professor of Pathology, Loma Linda University School of Medicine.

### *Pharmacology*

JOHN WEBB, PH.D., Professor and Head of Department of Pharmacology, USC School of Medicine.

---

### *Other Attractions*

- CLOSED CIRCUIT COLOR TELEVISION—From Presbyterian Medical Center. Participating Panels will include Guest Speakers. Television Programs will be shown Monday, Tuesday and Wednesday mornings.
- MEDICAL MOTION PICTURE SYMPOSIA—Motion picture symposia will be held Sunday, Monday and Tuesday afternoons and evenings and Wednesday afternoon.
- Pre-Convention Cancer Conferences on Pathology and Radiology, Saturday, April 14.
- Presidents' Dinner Dance, Sunday night, Venetian Room, Fairmont Hotel.
- House of Delegates Opening Session, Saturday evening, April 14; Tuesday afternoon and all day Wednesday.
- Hotel Reservations: See page 62.

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### PLAN NOW TO ATTEND

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Sunday through Wednesday, April 15-18, 1962  
FAIRMONT HOTEL, SAN FRANCISCO

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# APPLICATION FOR HOTEL ACCOMMODATIONS

FOR YOUR CONVENIENCE in making hotel reservations for the coming meeting of the **California Medical Association**, April 15-18, 1962, San Francisco, hotels and their rates are at the right. Use the form at the bottom of this page, indicating your first and second choice. Because of the limited number of single rooms available, your chance of securing accommodations of your choice will be better if your request calls for rooms to be occupied by two or more persons. **All requests for reservations must give definite date and hour of arrival as well as definite date and approximate hour of departure; also names and addresses of all occupants of hotel rooms must be included.**

**All Reservations must be made  
through the  
C.M.A. Housing Bureau**

**DEADLINE: MARCH 16, 1962**

## Ninety-first Annual Session CALIFORNIA MEDICAL ASSOCIATION San Francisco, California APRIL 15\*-18, 1962

### HOTEL ROOM RATES†

	Single	Twin Beds	Suites
<b>MARK HOPKINS*</b> (HEADQUARTERS) California and Mason.....	18.00-22.00	22.00-26.00	35.00-110.00
<b>FAIRMONT</b> California and Mason.....	17.00-24.00	21.00-28.00	40.00- 96.00
<b>FAIRMONT TOWER</b> California and Mason.....	26.00-31.00	30.00-36.00	from 65.00
<b>HUNTINGTON</b> 1075 California .....	14.00-20.00	15.00-25.00	40.00- 50.00
<b>SHERATON-PALACE</b> Market at New Montgomery	9.85-15.00	13.85-19.00	25.00- 75.00
<b>ST. FRANCIS</b> Powell and Geary.....	12.00-24.00	15.00-27.00	30.00- 55.00
<b>SIR FRANCIS DRAKE</b> Sutter and Powell.....	12.00-17.00	14.00-22.00	34.00- 52.00
<b>JACK TAR</b> Van Ness and Geary.....	14.00-24.00	16.00-24.00	32.00- 54.00

\*April 14: House of Delegates will start with evening meeting Saturday, April 14, at the Mark Hopkins Hotel; all Scientific Sessions and Exhibits will be at the Fairmont Hotel.

†The above quoted rates are existing rates but are subject to any change which may be made in the future.

CALIFORNIA MEDICAL ASSOCIATION—Housing Bureau  
693 Sutter Street  
San Francisco 2, California

Please reserve the following accommodations for the 91st Annual Session of the California Medical Association, in San Francisco, April 15-18, 1962. (House of Delegates members: First meeting of House begins Saturday afternoon, April 14, Mark Hopkins Hotel.)

Single Room \$..... Twin-Bedded Room \$.....  
Small Suite \$..... Large Suite \$..... Other Type of Room \$.....

First Choice Hotel..... Second Choice Hotel.....

ARRIVING AT HOTEL (date):..... Hour:..... A.M. .... P.M. { Hotel reservations will be held until  
Leaving (date) ..... Hour:..... A.M. .... P.M. { 6:00 p.m., unless otherwise notified.

THE NAME OF EACH HOTEL GUEST MUST BE LISTED. Therefore, please include the names of both persons for each twin-bedded room requested. Names and addresses of all persons for whom you are requesting reservations and who will occupy the rooms asked for:

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Individual Requesting Reservations—Please print or type: Officer?..... Delegate?..... Alternate?.....  
Name..... County.....  
Address..... City and State.....

## COOK COUNTY

### *graduate school of medicine*

**INTENSIVE POSTGRADUATE COURSES**

**STARTING DATES—WINTER-SPRING, 1962**

Surgical Technic.....	Two Weeks, Feb. 19, April 2
Surgery of Colon & Rectum.....	One Week, Mar. 5
Surgical Board Review, Part II.....	Two Weeks, Mar. 5
General Surgery.....	One Week, Feb. 26; Two Weeks, April 2
Gynecology, Office & Operative.....	Two Weeks, April 9
Vaginal Approach to Pelvic Surgery.....	One Week, Mar. 26
Obstetrics, General & Surgical.....	Two Weeks, Mar. 12
Pain Relief in Childbirth.....	3 Days, Mar. 7
Proctoscopy & Sigmoidoscopy.....	One Week, Mar. 26
Treatment of Varicose Veins.....	One Week, Mar. 26
Basic Internal Medicine.....	Two Weeks, Mar. 26
Basic Electrocardiography.....	One Week, Mar. 19
Gallbladder Surgery.....	3 Days, Mar. 12
Surgery of Hernia.....	3 Days, Mar. 15
Urology.....	Two Weeks, April 2
Surgery of the Hand.....	One Week, April 16

**TEACHING FACULTY:**

Attending Staff of Cook County Hospital

**ADDRESS:**

**REGISTRAR, 707 South Wood Street,  
Chicago 12, Illinois**

### **Emotions Can Affect Accident Tendency**

(Continued from Page 38)

avoid walking around the front of a truck. The man explained that he had avoided walking in front of trucks ever since he had been hit by a truck as a child.

In another case, an employee who was annoyed at his helper's carelessness overlooked a safety precaution himself in handling some chemicals. Although an accident did not occur, a violent explosion could have resulted. When interviewed, the employee said:

"I was so mad with the helper, I knew something would go wrong. I guess the strain was too much for me waiting for him to do something wrong so I went ahead and did it myself."

In another instance, a man fractured a finger while working on a machine and explained he was still "burned up inside" after an argument with his wife the night before.

Dr. Rogg concluded that "individuals do become emotionally charged under some circumstances in a manner that may predispose them to accidents."

**PULMONARY EOSINOPHILIA**—F. P. Incaperra. *Amer. Rev. Resp. Dis.*—Vol. 84:730 (Nov.) 1961.

A case of pulmonary eosinophilia with the results of steroid therapy is reported. Long-term therapy is recommended in view of the frequency of relapses, whenever therapy is required.



This beautiful, heated swimming pool highlights the spacious lawn and recreation area at Camelback Hospital. Other outdoor activities include volley ball, ping pong, shuffleboard and badminton, all under the supervision of a trained therapist. Those preferring restful relaxation may enjoy a quiet conversation in the beautiful lawn and grove area with its scenic mountain backdrop.

Located in the heart of the beautiful Phoenix citrus area near picturesque Camelback Mountain, the hospital is dedicated exclusively to the treatment of psychiatric and psychosomatic disorders, including alcoholism.

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- General Scientific Meetings
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- Specialty Scientific Meetings
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Closed Circuit from Presbyterian Medical Center—Mornings,  
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Daily, Afternoons and Evenings
- Scientific Exhibits • Technical Exhibits

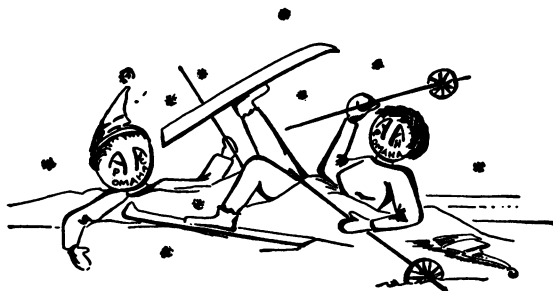
CALIFORNIA MEDICAL ASSOCIATION

## *1962 Annual Session*

FAIRMONT HOTEL • SAN FRANCISCO *April 15 to 18*

- Presidents' Dinner Dance  
Sunday, April 15—Venetian Room
- House of Delegates  
(MARK HOPKINS HOTEL)  
Opening Session Saturday Evening, April 14  
Tuesday Afternoon, April 17, and Wednesday, April 18
- Registration Daily  
8:30 a.m. to 5:00 p.m. . . . No Registration Fee

HOTEL ROOM RESERVATIONS SHOULD BE MADE ONLY THROUGH C.M.A. OFFICE  
IN SAN FRANCISCO. USE RESERVATION REQUEST FORM ON ADVERTISING PAGE 82.



Protection against loss of income from accident and sickness as well as hospital expense benefits for you and all your eligible dependents.



### PHYSICIANS CASUALTY & HEALTH ASSOCIATIONS

OMAHA 31, NEBRASKA

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### New Antidote Effective Against Phosphorus Poisoning

A two-year-old boy who was almost fatally poisoned by swallowing insecticide was revived in less than 20 minutes by the administration of a new antidote, it was reported recently.

The case was described in the November *Archives of Environmental Health*, published by the American Medical Association.

The youngster swallowed some parathion, a toxic phosphorus compound, which had spilled to the ground apparently from a pesticide container, Drs. Griffith E. Quinby, Wenatchee, Wash., and Gordon B. Clippison, Yakima, Wash., reported.

The child was rushed to a hospital in an unconscious condition. The usual antidote, atropine, was administered but did little to improve his condition, the physicians said. It was then decided to try a new agent, 2-PAM (2-pyridine aldoxime methiodide), they said.

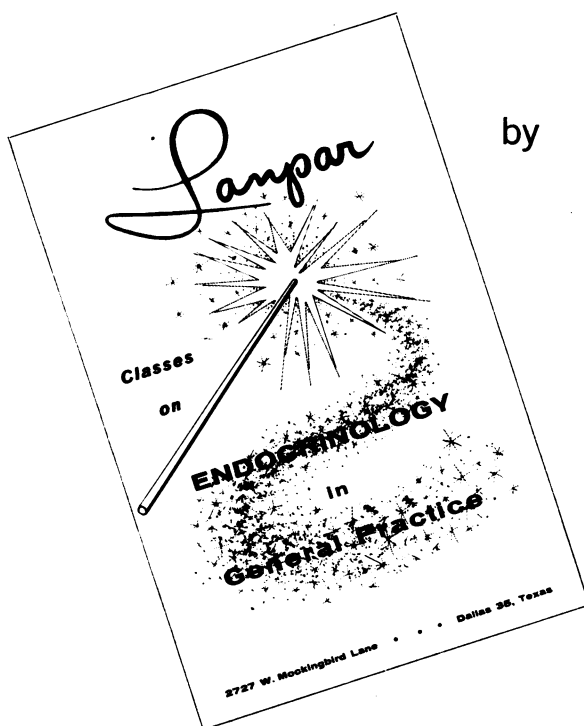
Within 10 minutes after it was given, they said, the boy began to move and respond.

"He appeared to be an exhausted but reasonably normal, sleepy child," they said. "No additional treatment was given."

The authors said they believed the continued administration of atropine would have brought about the child's recovery but not as promptly as did

(Continued on Page 76)

## ENDOCRINOLOGY IN GENERAL PRACTICE



by

Lanpar

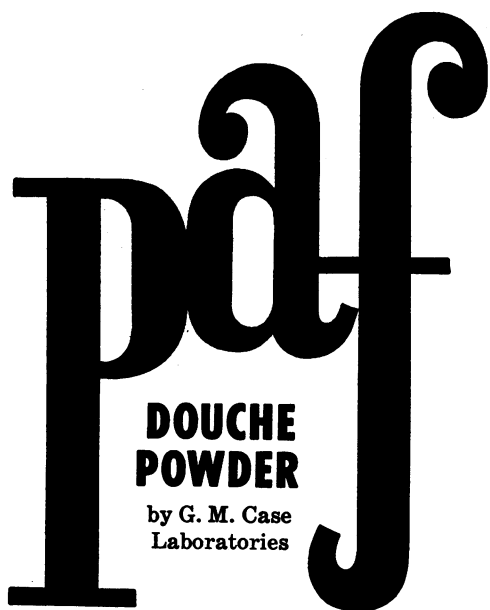
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We would like to take this opportunity of inviting you to attend one of our highly informative classes dealing with Endocrinology in General Practice.

Our classes, as outlined in the booklet shown at the left, are designed to present the most current up-to-date information on such problems as endocrine disorders and metabolic imbalance, cardiovascular conditions, hypertension and neuroses, arthritis and diabetes.

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G. M. Case Laboratories, San Diego, California

## Stomach Checked by Swallowing Tiny Radio

A tiny radio device which can report on the acidity of the stomach after it is swallowed was described in the November 25 *Journal of the American Medical Association*.

An electrode sensitive to acidity is connected to the capsule radio which transmits an FM radio signal, Edward H. Storer, M.D., David T. Dodd, M.D., Peter A. Snyder and Charles O. Eddlemon, B.S., University of Tennessee College of Medicine, Memphis, Tenn., said.

"The signal is transmitted at 9.6 megacycles at a power of about one milliwatt," they said. "Because of the very short range of the signal, a circular receiving antenna coil is worn like a belt by the person being tested. A signal . . . can be picked up by a suitable receiver at distances up to three feet from the antenna."

Although the device is "still very crude," the researchers said, it demonstrated that the principle is sound.

The present device is "too large to be swallowed by anyone except a dedicated investigator," they said. However, they said, it is hoped that the need for batteries can be eliminated and other components can be further miniaturized so that the capsule can be swallowed without discomfort.

The device was developed as a better method of determining stomach acidity, which has an important relationship to peptic ulcer and stomach cancer, they said.

## New Antidote Effective Against Phosphorus Poisoning

(Continued from Page 56)

2-PAM which proved "an extremely effective and rapid therapeutic agent in a near-fatal case."

"Because it is a specific antidote, 2-PAM should reduce the severity of illness and mortality rate of severe poisoning due to organic phosphorus compounds," they said.

The phosphorus compounds are used widely as insecticides and contain some of the most toxic agents known, the "nerve gases." The poison inhibits the production of one of the body's enzymes, cholinesterase, which is important to the normal function of the body.

Reports of the use of 2-PAM in such cases in other countries have appeared in Japan, England and this country, they said. However, the present case is believed to be the first treated with 2-PAM in the United States, they said.

## SERIAL DEVELOPMENT OF TEETH IN AN OVARIAN TERATOMA:

A 13-YEAR X-RAY RECORD OF NEOPLASIA—E. Wollin and M. B. Ozonoff. *New Engl. J. Med.*—Vol. 265:897 (Nov. 2) 1961.

A series of roentgenograms record the successive appearance and progressive differentiation of several teeth in an ovarian teratoma. The relevance of this observation to theories of teratogenesis and neoplasia is discussed.

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<b>SHERATON-PALACE</b>			
Market at New Montgomery	9.85-15.00	13.85-19.00	25.00- 75.00
<b>ST. FRANCIS</b>			
Powell and Geary.....	12.00-24.00	15.00-27.00	30.00- 55.00
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.....

Individual Requesting Reservations—Please print or type: Officer?..... Delegate?..... Alternate?.....  
Name..... County.....  
Address..... City and State.....